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State of New York

2 6974 CLINTON PRISON

TUBERCULOSIS
HOSPITAL
EXHIBIT



Hospital located
at Dannemora, in the
Adirondacks.



NEW YORK STATE FAIR
Syracuse, N. Y., September, 1912

Presented to the
Statistical Division, Surgeon-General's
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State of New York

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PRISON OFFICIALS

TUBERCULOSIS

Hon. Joseph F. Scott	Superintendent
Harry M. Kaiser	Agent and Warden
Thomas F. Coultry	Principal Keeper
Lewis L. Filkins	Ass't Principal Keeper
Rev. Francis H. Pierce	Chaplain
Rev. George Belanger	Visiting Chaplain
Rabbi S. Judelson	Visiting Chaplain
Wm. H. Gilbert	Supt. of Industries

MEDICAL STAFF

Julius B. Ransom, M. D.	Physician
Walter N. Thayer, M. D.	Ass't Physician
Robert A. Sloss, Ph. G.	Pharmacist

NURSING STAFF

John B. Severance	Head Nurse
Misses	Baltimore, Md., Septem, 1912

TUBERCULOSIS WORK AT CLINTON PRISON

The inception of the anti-tuberculosis work in the prisons of the State of New York dates back to 1889, at which time the mortality from tuberculosis was fast assuming alarming proportions. As for instance, in the three prisons of the State from the year 1889 to 1894 inclusive there were 304 deaths from tuberculosis, and in the year 1891 the deaths from this cause reached the high point of 76.

As a result of the establishment of the Tuberculosis Hospital at Clinton Prison, transfer and special treatment, together with improved hygienic conditions, this mortality from tuberculosis was reduced in the three prisons, in percentages, from .01398 for the period of 1889 to 1894 inclusive, to .00442 for the period of 1895 to 1909 inclusive; and the maximum annual death rate of 76 reduced to a minimum of 7.

Clinton Prison is located on the Southern slope of a North-eastern spur of the Adirondack mountains and has an elevation of fifteen hundred feet above sea level. The institution is located in the midst of a large tract of State land, the State owning several thousand acres in this vicinity. Several acres of this land are under cultivation for the purpose of raising vegetables for the institution.

The water supply is obtained from mountain springs, remote from contamination, piped to reservoirs, and thence to the buildings of the institution.

The sewerage system is by gravitation, iron piped within the buildings, and tile without. The main sewer is twelve inches in diameter and finds outlet in a rapidly running brook.

The favorable location of the institution for the treatment of Pulmonary and Laryngeal Tuberculosis has led to the transfer of patients suffering from tuberculosis from the other prisons of the State to Clinton Prison.

The support and income of the institution is entirely by State appropriation. In 1893 a special ward was set aside for the treatment of the tuberculous; this ward accommodated only 11 patients. Not until 1901, was anything in the way of systematic work begun in this direction. During that year an appropriation was obtained, and a special ward accommodating 43 patients was built and went into operation on July 8, 1902, making a total of 54 patients receiving special treatment for tuberculosis at that time. The results were so favorable that in 1905 a ward was completed accommodating 107 patients which gives a total bed capacity of 150. This now constitutes what is known as the Clinton Prison Tuberculosis Hospital Annex.

TUBERCULOSIS ANNEX

The Tuberculosis Hospital Annex consists of three extensions to the main Hospital, radiating from a central court, and occupying a floor space of 20,000 square feet. The Southern extension 72x55 feet is devoted to the treatment of far advanced cases and accommodates over forty patients. The Eastern extension 20x55 feet, forms the special Diet Kitchen and Laboratory, while the Northeastern extension, 70x150 feet is devoted to treatment of cases in the early and somewhat advanced stages.

The main ward is constructed with a high, vaulted roof; the ceiling extended upward by a clerestory to a distance of 55 feet, thus affording a large air and light space. The building is windowed on all sides as closely as safe architecture permits, the clerestory being entirely set with windows opening and closing by a mechanical device. In connection with this ward are modern lavatories, toilet facilities for spray and tub baths, rooms devoted to the treatment of patients by the incandescent and arc lights, and a disinfecting room.

The ward has a hard wood floor, waxed and polished, is heated by steam and lighted by electricity. Adjoining this ward is a dining-room that will seat 120 persons, the food for whom is supplied from the special Diet Kitchen. The ward is cheerful, light and airy and admirably meets the purpose for which it was designed. Each patient has a white enameled iron bed, furnished with woven wire springs, fibre mattress, feather pillow, sheets, woollen blankets and

counterpane. At the head of each bed is a white enameled steel bedside table with glass top and steel shelf, while at the foot is a comfortable arm-chair. The patients are supplied with a porcelain lined drinking cup; and different forms of sputum cups. The ward devoted to the treatment of the far advanced cases is similar in most particulars.

The Diet Kitchen, an important factor in this work, is equipped with a 9 foot French steel range, steam vegetable cooker, a large porcelain lined refrigerator, and all modern appliances.

As far as possible all patients receive modern outdoor treatment. The hospital patients spend the whole of the prison day outdoors in a large open court supplied with running spring water, seats, reclining chairs, elevated cuspidors (in which is kept antiseptic solutions), and a crematory for sputum. This is supplemented by X Ray, incandescent light and such medicinal treatment as is indicated.

Special clothing, such as overcoats, etc., are provided for these men during the cold weather. They are fed a generous mixed diet in which proteids, such as fresh meats and eggs predominate. All patients receive milk, Kumyss or buttermilk daily and cases requiring it, receive special or additional diet by order of the physician.

A library of 1400 volumes and 18 weekly and monthly periodicals is maintained for the use of the tuberculosis hospital.

On receipt of a prisoner suspected of having tuberculosis he is given a special examination including one of the tuberculin tests, and microscopic examination made of the sputum, blood and urine, and careful record made and kept of his condition. If found tuberculous he is placed in the Tuberculosis Hospital and kept entirely separate from the general prison population. If the disease is arrested or apparently cured he is placed at light labor until he is discharged from prison.

Patients are admitted to this Hospital by direct commitment from the Court to the Prison, but by far the larger number are transferred on order of the Superintendent of Prisons from other penal institutions of the State.

TUBERCULOUS POPULATIONS 1894-1912

The number of patients transferred since the beginning of this work to July 31, 1912 was 2049.

Total treated 2442
 Average annual tuberculous population 351.3
 Average percentage of deaths upon tuberculous population 1.757

SUMMARY OF TUBERCULOSIS WORK

1904 to 1912 inclusive.

Received direct	134
" from Sing Sing	744
" " Auburn	294
" " Eastern N. Y. Reformatory	38
" " Elmira Reformatory	15
" " Dannemora State Hospital	7
" " Great Meadows	400

Developed since reception	52
Returned from Parole	5

Cases discharged from prison in which results were recorded during above nine years	995
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Apparently cured	197 or 19.8
Arrested	275 " 27.68
Improved	400 " 40.21
Unimproved	50 " 5.03
Died	64 " 6.33
Died from other causes	9 " .95

Rules for Guidance of the Tuberculous Prisoner

- 1 Remember that tuberculosis is chiefly spread, both to others and yourself by means of the dry spittle. Always spit in the center of your spit-cup, never on the sides. Keep your cup clean.
- 2 Avoid smearing clothing or any article with spittle. Never swallow your spittle.
- 3 Keep everything about bed, table and person clean, especially your clothing. Do not stir up dust. Keep your coat and vest buttoned and your general appearance as neat as possible.
- 4 Brush your teeth well and always rinse your mouth before eating ; this can be done by taking a swallow of water from your drinking cup, and discharging it into your spit-cup. Do not drink out of another's cup, or use his tooth-brush, knife, fork or spoon.
- 5 Try to eat everything set before you with a relish, masticating (chewing) your food thoroughly. A cheerful eater will do well, a fault-finder will not.
- 6 Remember that to cure tuberculosis takes time, and that its cure depends largely upon yourself; that is, your habits and disposition. A cheerful, willing disposition to observe all rules, both of health and comfort, will help very largely towards your cure.
- 7 This unusual opportunity afforded you to rid yourself of, if neglected, a fatal disease is dependent upon your good conduct as a prisoner, and cannot be continued unless you show appreciation by obeying all rules and deporting yourself in a proper manner.

